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	PATI	ENT APPLIC		FEE DETER tor Form PTC	N RECORD		19189816/3			
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED N			NUMBE	REXTRA	RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))					s	OR		S		
TOTA	TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 =				x s _ =		OR	x \$=		
(37 CFR 1.16(b)) minus 3 = 1						-	OR	x \$ =		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)).						+5 =		OR	+ 5 =	
* If the difference in column 1 is less than zero, enter *0* in column 2.						<u> </u>		OR	TOTAL	
• If th	ie difference in c	oluṁn 1 is less tha	n zero, ente	er "0" in column 2	2.	TOTAL		J OK	TOTAL	
	CL	AIMS AS AME	ENDED -	PART II						
/	41	(Column 1)		(Column 2)	(Column 3)	SMALL E	NTITY	OR	OTHER SMALL	
∀	, ,	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT	Total	AMENDMENT	Minus	" GO	=		FEE		u	FEE /
ğ	(37 CFR 1.16(c)) Independent	. 77	Minus	12/	-	x \$=		OR	× \$=	
Ä	(37 CFR 1.16(b))		<u> </u>		└/	X \$=		OR	=	
٩	FIRST PRESENT	ATION OF MULTIPU	E DEPENDE	T CLAIM (37 CF	R 1.16(d))	+s=	/	OR	+ \$=	/
•	-	•.		•	: (ADD'L FEE	/	OR .	ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)	<u> </u>		_		
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.16(c))	•	Minus	••	= .	x \$=		ÓR	x s =	
빎	Independent (37 CFR 1.16(b))	•	Minus		' <u>-</u>	X: \$ =		OR-	× \$=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				FR 1.16(d))	+ 5 =		OR	+ \$ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			_		
NT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	*	Minus	**	=	x s =		OR	x s=	
AMENDMEN	Independent (37 CFR 1.16(b))		Minus	***	=	x · \$ = =		OR	x \$ _ =	
					-	 	OR.	+ \$ =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						TOTAL		1	TOTAL .	
l		column 1 is less tha				ADD'L FEE	L	OR	ADD'L FEE	L

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.